

**Amendments to the Claims:**

Following is a complete listing of the claims pending in the application, as amended:

1. (Currently amended) A method for treating a condition responsive to interferon tau therapy, selected from an autoimmune condition, cancer, or a viral infection, in a human subject, comprising

orally administering interferon-tau to the intestinal tract of the subject in an amount effective to produce an initial measurable increase in the subject's blood 2', 5'-oligoadenylate synthetase (OAS) level, relative to the blood OAS level in the subject in the absence of interferon-tau administration, wherein said amount of interferon-tau is at least about  $4.9 \times 10^8$  Units/day, and

continuing to administer interferon-tau to the intestinal tract of the subject in such effective amount, on a regular basis of at least several times per week, for a period of at least one month, independent of changes in the subject's blood OAS level.

2. (Original) The method of claim 1, wherein said interferon-tau is an ovine interferon-tau having a sequence identified as SEQ ID NO:2 or SEQ ID NO:3.

3. (Original) The method of claim 1, wherein said continuing administration is carried out on a daily basis.

4. (Original) The method of claim 1, for treatment of multiple sclerosis in the subject, wherein said continuing administration is carried out during the period of patient symptoms.

5. (Original) The method of claim 1, for treatment of hepatitis C infection in the subject, which further includes detecting the presence of infection in the subject, and said continuing administration is carried out for a period of several months past the time when no viral infection is detected in the subject.

6. (Original) The method of claim 1, for treatment of cancer in the subject, which further includes administered an anticancer agent to the subject during the period of continuing administration of interferon-tau.

7. (Original) The method of claim 1, which further includes monitoring the subject's blood OAS level to ascertain if the OAS level is increased following said administering.